

COMMONWEALTH OF VIRGINIA DEPARTMENT OF MOTOR VEHICLES VEHICLE DISPOSITION HISTORY

VSA 44 (Rev. 09/01)

P.O. Box 274	12 Richmond, Va. 23269-0001	VEHICLE DIGITORI			
1	PROPERTY OWNER'S NAME (Last, First, Middle)			TELEPH	HONE NUMBER
PROPERTY OWNER/DESIGNEE AND VEHICLE INFORMATION	ADDRESS	CITY		STATE) ZIP CODE
	VEHICLE MAKE YEAR BODY TYPE VEHICLE IDENTIFICATION NUMBER				
	VEHICLE TYPE AUTO TRUCK	TRAILER	MODEL		IS VEHICLE OPERABLE?
ERT	SIGNATURE I hereby certify and affirm that the fac	OTHER	accurate and valid	DATE	YES NO
PROF >					
2	The above referenced vehicle was rele	eased to:			
	TOWING COMPANY NAME (OPERATOR)				
TOWING INFORMATION	ADDRESS	CITY		STATE	ZIP CODE
				1	
<u> </u>	SIGNATURE I hereby certify and affirm that the fac-	ets contained in this section are true,	accurate and valid.	DATE	
3	As provided under Section 46.2-1201 of the Code of Virginia, I hereby transfer possession of the above referenced vehicle to a registered demolisher for the purpose of demolition in conjunction with the Abandoned Vehicle Program. I hereby certify and				
NN N	affirm that the facts contained herein a	re true, accurate and valid			
LITICAL SDIVISION SRMATION	POLITICAL SUBDIVISION	AUTH	IORIZED OFFICIAL'S NAME		
SUBI NFOR	SIGNATURE		DATE	Т	ELEPHONE NUMBER
				()
4	NAME		DATE VEHICLE ACQU	IIRED	DEMOLISHER'S NUMBER
DEMOLISHER INFORMATION	ADDRESS	CITY		STATE	ZIP CODE
	I hereby certify that the above reference vehicle was demolished.				
	SIGNATURE		DATE	Т	ELEPHONE NUMBER
<u> </u>				()
5	DMV USE ONLY				
VEHICLE SERVICES MAIL PROCESSING	Is the Vehicle Identification Number or			□ No	
		·			
	Is the vehicle currently registered?	☐ Yes ☐ No			
	Is the vehicle recorded as stolen?	☐ Yes ☐ No			
	Has the vehicle been previously entere	ed as demolished?	∕es □ No		
	Comments				

DIRECTIONS FOR USE OF VEHICLE DISPOSITION HISTORY

For an Abandoned Vehicle Reimbursement - Sections 1, 2, 3, and 4 must be completed. This form must be returned to the political subdivision to be submitted to DMV.

For a Demolished Non-Reimbursement Vehicle - Sections 1, 2 (if towing service is provided) and 4 must be completed. The demolisher must forward the completed form to DMV along with proof of ownership (i.e., title, bill of sale, sales receipt).

MAILING ADDRESS: Department of Motor Vehicles

Abandoned Motor Vehicle Reimbursement Work Center

Room 424 P.O. Box 27412

Richmond, VA 23269-0001

1. This section must be completed by the property owner where the vehicle was found. If the vehicle was found on public property, the authorizing official from the appropriate political subdivision taking custody of the vehicle must complete this section.

The vehicle information must be completed before the vehicle is transported. The Vehicle Identification Number information is vital, complete this section carefully and legibly. Reimbursement will not be made for vehicles with incomplete or no vehicle identification number.

- 2. The towing operator completes this section to include the name of the towing company, his/her name, the address, his/her signature, and the date vehicle was transported.
- 3. This section must be completed by the authorized official from the political subdivision where the vehicle was located when determined to be abandoned. The purpose of this section is to authorize the demolisher to **hold** the indicated vehicle until demolition is authorized. When demolition is authorized, the official must sign and date this section.

NOTE: Reimbursement will not be made to any locality for vehicles acquired from sources outside its jurisdiction nor for vehicles received from dealers engaged in the business of dismantling used vehicles.

- 4. This section must be completed by the demolisher in order to certify that demolition has occurred to the indicated vehicle. A signature, date and telephone number are required for this section to be complete.
- 5. The last section is for DMV processing use only. Any information extracted from DMV computer files should be annotated here.